

Application Data Sheet**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	ADHESIVE TRANSDERMAL FORMULATIONS OF DICLOFENAC SODIUM
Attorney Docket Number::	2503-1104
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: GIUSEPPE
Middle Name::
Family Name:: PASSONI
Name Suffix::
City of Residence:: MONZA
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing Address:: VIA LECCO, 23
City of Mailing Address:: MONZA
State or Province of Mailing Address::
Country of Mailing Address:: ITALY
Postal or Zip Code of Mailing Address:: I-20052

Applicant Authority Type:: Inventor
Primary Citizenship Country:: ITALY
Status:: Full Capacity
Given Name:: PAOLO
Middle Name::
Family Name:: CASETTA
Name Suffix::
City of Residence:: BAVENO
State or Province of
Residence::
Country of Residence:: ITALY
Street of Mailing Address:: STRADA NAZIONALE SEMPIONE-BAVENO, 3
City of Mailing Address:: BAVENO

State or Province of Mailing Address::

Country of Mailing Address:: ITALY

Postal or Zip Code of Mailing Address:: I-28831

Applicant Authority Type:: Inventor

Primary Citizenship Country:: ITALY

Status:: Full Capacity

Given Name:: PAOLA

Middle Name::

Family Name:: STEFANELLI

Name Suffix::

City of Residence:: LECCE

State or Province of
Residence::

Country of Residence:: ITALY

Street of Mailing Address:: VIA TURATI, 23

City of Mailing Address:: LECCE

State or Province of Mailing Address::

Country of Mailing Address:: ITALY

Postal or Zip Code of Mailing Address:: I-73100

Correspondence Information

Correspondence Customer 000466

Number::

Representative Information

Representative Customer	000466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/EP02/13473	11/26/02

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
ITALY	MI2001A002827	12/28/01	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::